PATENT APPLICATION FEE DETERMINATION RECORD

Application	orDocket	Number
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Effective October 1, 2003								10	7-9	7015	-3	
CLAIMS AS FILED - PART I					SMALL ENTITY OTHER TH							
(Column 1) (Column 2)						TYPE	L		OR	SMALL	ENTITY	
TOTAL CLAIMS		16			·	RAT	E	FEE] ·	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			// minus 20=		* 0		X\$ 9	=		OR	X\$18=	·
INDEPENDENT CLAIMS			minus 3 =		* /		X43	=		OR	X86=	86-
MULTIPLE DEPENDENT CLAIM PRESENT						+145	_		OR	+290=	76,5	
* If the difference in column 1 is less than zero, enter "0" in column 2						TOTA	L		4 1	TOTAL	816	
	C	LAIMS AS A	MENDER) - PΔR'	ТП			L		10	•	- ابنداده
	_	(Column 1)		(Colun		(Column 3)	OTHER THAN SMALL ENTITY OR SMALL ENTITY					
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIC PAID I	EST BER JUSLY	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=	X\$ 9:	.		OR	X\$18=	
AME	Independent	*	Minus	***		=	X43=			OR	X86=	
	FIRST PRESE	ENTATION OF MI	DETIPLE DEF	PENDENT	CLAIM		+145=			OR	+290=	
							TOT	AL		1	TOTAL	
				_	٠		ADDIT. F	EL		OR ,	ADDIT. FEE	
		(Column 1) I CLAIMS	1	(Colum		(Column 3)		_				
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	IER USLY	PRESENT EXTRA	RATE		ADDI- FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**	•	= .	X\$ 9=			OR	X\$18=	
AME	Independent	* NTATION OF MU	Minus	***	CL AIM	= .	X43=			OR	X86=	
		NIATION OF MO	CHPLE DEP	ENDEN	CLANVI		+145=			OR	+290≃	
							ADDIT. FE			OR ,	TOTAL ODIT. FEE	
		(Column 1)		(Colum	n·2)	(Column 3)						•
ENTC		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUMB PREVIOU PAID F	ST ER USLY	PRESENT . EXTRA	RATE		ADDI- IONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total	*	Minus	**		=	X\$ 9=			OR	X\$18=	
	Independent	*	Minus	***		=	X43=	T			X86=	
9	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT	CLAIM		A40=	+		OR	700=	
* 15	the entry is only	nn 1 is loss than the			O7 in!		+145=			OR	+290=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ***OR TOTAL ADDIT. FEE												
T	he "Highest Num	ber Previously Paid	For" (Total or	Independer	nt) is the	highest number fo	ound in the a	ppro	priate box	in colu	mn 1.	